PIECP - CONSOLIDATED QUARTERLY STATISTICAL REPORT

	Reporting Quarter Dates: 7/1/2017	*****	9/30	/2017				
	Name of Certificate Holder: IOWA I	PRISON	INDUSTRIES		:			
(1)	Total inmate labor hours worked during quarter:		38,569.0	Hour	'S			
(2)	Total number of inmates employed during quarter:	1	79	Total Inmates				
(3)	Total quarterly gross wages paid:	\$	421,652.00	= -				
(4)	Total quarterly contributions to Federal taxes:	\$	46,842.00					
(5)	Total quarterly contributions to State taxes:	\$	15,427.00					
(6)	Total quarterly contributions to Social Security:	\$	32,256.00					
	(FICA and Medicare)							
(7)	Total quarterly contributions to other taxes:	\$	-					
(8)	SUB-TOTAL of taxes paid this quarter (#4- #7):			\$	94,525.00			
(9)	Total quarterly contributions to victim's programs:	\$	106,920.00	-				
(10)	Total quarterly contributions to room and board:	\$	124,728.00					
(11)	Total quarterly contributions to family support:	\$	11,146.00	1 1 				
(12)	SUB-TOTAL of PIECP Categorical Deductions (#9-#11):			\$	242,794.00			
(13)	Total quarterly contributions to mandatory savings:	\$	1,800.00					
(14)	Since the last quarterly report, have you materially changed the scope, processes or products associate with this cost accounting center? If yes, please explain:							
	No.	xpiani.						
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	Certified correct by: Daniel J. Clark, Deputy Di	rector,	Iowa Prison Ind	ustries	· · · · · · · · · · · · · · · · · · ·			
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	Signature		des alsole	Dat	te			
Tele	ephone no: (515) 822-8920 Email Address:		dan.clark@	يiowa.	.gov			

	Reporting Quarter Dates:	7/1/2017		9/30	/2017	······································	
	Name of Cost Accounting Center:		Н&Н	LLC			
	PIECP Management Model:		Empl	oyer			
	INSTITUTION Name and Address:		da Correctional Facility th Street, Clarinda, IA 51632				
(1)	Total inmate labor hours worked during	ng quarter:		28,736.7	Hours		
(2)	Total number of inmates employed du	ring quarter:		50	Total Inmates		
(3)	Total quarterly gross wages paid: Hourly wage range	\$8.24 - 13.03	\$	321,842.72	: : = :		
	(or) Pieces work rate	N/A					
(4)	Total quarterly contributions to Federa	;	\$	37,553.68			
(5)	Total quarterly contributions to State to	axes:	\$	12,584.23			
(6)	Total quarterly contributions to Social (FICA and Medicare		\$	24,620.90			
(7)	Total quarterly contributions to other t	axes:	\$	-			
(8)	SUB-TOTAL of taxes paid this quarter	(#4- #7):			\$	74,758.81	
(9)	Total quarterly contributions to victim'	s programs:	\$	74,999.86	:		
(10)	Total quarterly contributions to room a	nd board:	\$	99,027.95			
(11)	Total quarterly contributions to family	support:	\$	8,687.63	<u> </u>		
(12)	SUB-TOTAL of PIECP Categorical Ded	uctions (#9-#11):			\$	182,715.44	
(13)	Total quarterly contributions to manda	tory savings:	\$	1,506.93	-		
(14)	Since the last quarterly report, have you associate with this cost accounting cent			scope, processes	s or pro	ducts	
	Certified correct by: Daniel J.	Clark. Denutu Dii	rector. I	owa Prison Ind	ustries		
	N M	Cm/11, 2 cp mg 2 m		11/14	117		
	Signature			dan.clark@	Date Diowa.c		
Tele	ephone no: (515) 822-8920	Email Address:					

	Reporting Quarter Dates:	7/1/2017		9/30	/2017		
	Name of Cost Accounting Center:	Nu	NuAge Marketing				
	PIECP Management Model:		Emplo	yer			
	TA LOTTING TOTAL AND A LA LA			ectional Facilit	-		
	INSTITUTION Name and Address:	313 Lanedale	e, Kockw	rell City, IA 505	579		
(1)	Total inmate labor hours worked during	ng quarter:		2,299.4	Hours		
(2)	Total number of inmates employed du	ring quarter:		12	Total Inmates		
(3)	Total quarterly gross wages paid: Hourly wage range	\$8.96	\$	22,499.13			
	(or) Pieces work rate	N/A					
(4)	Total quarterly contributions to Federa		\$	1,290.40			
(5)	Total quarterly contributions to State to	axes:	\$	372.41			
(6)	Total quarterly contributions to Social (FICA and Medicare		\$	1,721.18			
(7)	Total quarterly contributions to other t	*	\$		-		
(8)	SUB-TOTAL of taxes paid this quarter	(#4- #7):			\$	3,383.99	
(9)	Total quarterly contributions to victim	's programs:	\$	7,173.67	1 1 1		
(10)	Total quarterly contributions to room a	and board:	\$	5,807.36	: : :		
(11)	Total quarterly contributions to family	support:	\$	1,634.26			
(12)	SUB-TOTAL of PIECP Categorical Dec	luctions (#9-#11):			\$	14,615.29	
(13)	Total quarterly contributions to manda	ntory savings:	\$	114.97			
(14)	Since the last quarterly report, have yo associate with this cost accounting cen	, .		cope, processes	or prod	ucts	
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	Certified correct by: Daniel J.	Clark, Deputy Dir	ector, Io	wa Prison Ind	ustries		
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	Signature			dan.clark@	Date Diowa.go	οV	
Tele	ephone no: (515) 822-8920	Email Address:		<u> </u>			

	Reporting Quarter Dates:	7/1/2017		9/30/2017		:	
	Name of Cost Accounting Center:	Rose Acre	re Farms - Guthrie Center				
	PIECP Management Model:		Employer				
	INSTITUTION Name and Address:	North Central Correctional Facility 313 Lanedale, Rockwell City, IA 50579					
(1)	Total inmate labor hours worked durir	ng quarter:		1,381.3	Hours		
(2)	Total number of inmates employed du	ring quarter:	<u> </u>	3	Total Inmates		
(3)	Total quarterly gross wages paid: Hourly wage range	\$9.21	\$	13,987.50	-		
	(or) Pieces work rate	N/A					
(4)	Total quarterly contributions to Federa	l taxes:	\$	2,162.36			
(5)	Total quarterly contributions to State ta	axes:	\$	402.00			
(6)	Total quarterly contributions to Social S (FICA and Medicare)		\$ 1,070.03				
(7)	Total quarterly contributions to other ta	axes:	\$	_			
(8)	SUB-TOTAL of taxes paid this quarter	(#4- #7):			\$	3,634.39	
(9)	Total quarterly contributions to victim's	s programs:	\$	5,189.89			
(10)	Total quarterly contributions to room a	nd board:	\$	2,365.72	4 4 1		
(11)	Total quarterly contributions to family	support:	\$	_			
(12)	SUB-TOTAL of PIECP Categorical Ded	uctions (#9-#11):			\$	7,555.61	
(13)	Total quarterly contributions to manda	tory savings:	\$	41.68			
(14)	Since the last quarterly report, have you associate with this cost accounting cent			cope, processes	or prodi	ucts	
	Certified correct by: Daniel J.	Clark, Deputy Dis	ector, Io	wa Prison Ind	ustries		
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Tele	Signature cphone no: (515) 822-8920	Email Address:		dan.clark@	Date Diowa.go	<u>V</u>	

	Reporting Quarter Dates:	7/1/2017		9/30,	/2017			
	Name of Cost Accounting Center:	Graphic Edge						
	PIECP Management Model:		Emplo	oyer				
	INSTITUTION Name and Address:	North Central Correc 313 Lanedale		Facility vell City, IA 505	579			
(1)	Total inmate labor hours worked du	ring quarter:	g quarter: 6,152.0			Hours		
(2)	Total number of inmates employed d	luring quarter:		14	Total I	nmates		
(3)	Total quarterly gross wages paid: Hourly wage range	\$10.08	\$	63,321.66	Total and the second of the se			
	(or) Pieces work rate	N/A						
(4)	Total quarterly contributions to Fede	ral taxes:	\$	5,835.99				
(5)	Total quarterly contributions to State	taxes:	\$	2,069.39				
(6)	Total quarterly contributions to Social (FICA and Medican	and the second s	\$ 4,844.11					
(7)	Total quarterly contributions to other	taxes:	\$	-				
(8)	SUB-TOTAL of taxes paid this quarte	er (#4- #7):			\$	12,749.49		
(9)	Total quarterly contributions to victing	n's programs:	\$	19,556.34				
(10)	Total quarterly contributions to room	and board:	\$	17,527.07				
(11)	Total quarterly contributions to famil	y support:	\$	824.40	•			
(12)	SUB-TOTAL of PIECP Categorical De	eductions (#9-#11):			\$	37,907.81		
(13)	Total quarterly contributions to mand	datory savings:	\$	136.77				
(14)	Since the last quarterly report, have y associate with this cost accounting ce			cope, processes	or pro	ducts		
	Certified correct by: Daniel	J. Clark, Deputy Dir	ector, Id	owa Prison Indi	ustries			
	i M			11/1.	4/17			
	Signature			dan.clark@	Date	IOV		
Tele	ephone no: (515) 822-8920	Email Address:		<u>aan.oiai Ne</u>	2,10 Wa.C			

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	dan.clark	Date (@iowa.gov
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	Reporting Quarter Dates: 7/1/2	2017	9/30/2017	
	Name of Cost Accounting Center:	Jet Compa	ny	
	PIECP Management Model:	Employe	er	
	North Cent INSTITUTION Name and Address: 313 Lanedal	tral Correctional Fac e, Rockwell City, IA	2	
(1)	Total inmate labor hours worked during quarte	r:	Hours	
(2)	Total number of inmates employed during quar	rter:	Total Inmat	tes
(3)	Total quarterly gross wages paid:	\$	-	
	Hourly wage range N/A			
	(or) Pieces work rate N/2	A		
4)	Total quarterly contributions to Federal taxes:	\$		
5)	Total quarterly contributions to State taxes:	\$		
(6)	Total quarterly contributions to Social Security: (FICA and Medicare)	\$		
(7)	Total quarterly contributions to other taxes:	\$	_	
8)	SUB-TOTAL of taxes paid this quarter (#4- #7):		\$	_
9)	Total quarterly contributions to victim's program	ms: \$	-	
10)	Total quarterly contributions to room and board	d: \$		
11)	Total quarterly contributions to family support:	\$	-	
12)	SUB-TOTAL of PIECP Categorical Deductions (#9-#11):	\$	
l3)	Total quarterly contributions to mandatory savi	ngs: \$		
14)	Since the last quarterly report, have you material associate with this cost accounting center? If yes This CAC did not emplo	s, please explain:	***************************************	
	Certified correct by: Daniel J. Clark, D	eputy Director, Iowa	a Prison Industries	
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	Reporting Quarter Dates:	7/1/2017		9/3	0/2017	
	Name of Cost Accounting Center:	Rock	Communic			
	PIECP Management Model:		Employer			
	INSTITUTION Name and Address:	Newton Co 307 S 60th A				
(1)	Total inmate labor hours worked duri	ng quarter:			Hours	
(2)	Total number of inmates employed du	ıring quarter:			Total Inmates	
(3)	Total quarterly gross wages paid: Hourly wage range	N/A	\$	_		
	(or) Pieces work rate	N/A				
(4)	Total quarterly contributions to Federa		\$	-		
(5)	Total quarterly contributions to State t	axes:	\$	_		
(6)	Total quarterly contributions to Social (FICA and Medicare		\$			
(7)	Total quarterly contributions to other t	axes:	\$	_		
(8)	SUB-TOTAL of taxes paid this quarter	(#4- #7):			\$ -	
(9)	Total quarterly contributions to victim	's programs:	\$	-		
(10)	Total quarterly contributions to room	and board:	\$	-		
(11)	Total quarterly contributions to family	support:	\$	-	A Section of the Control of the Cont	
(12)	SUB-TOTAL of PIECP Categorical Dec	ductions (#9-#11):			\$ -	
(13)	Total quarterly contributions to manda	atory savings:	\$	_		
(14)	Since the last quarterly report, have yo associate with this cost accounting cen This CAC did r		xplain:		s or products	
	Certified correct by: Daniel J.	Clark, Deputy Dir	ector, Iowa	Prison Inc	dustries	
			to exercise the second second	11/14	1/17	
Tele	Signature ephone no: (515) 822-8920	Email Address:		dan.clark	@iowa.gov	

	Reporting Quarter Dates:	7/1/2017		9/30/2017
	Name of Cost Accounting Center:	Misty	y Harbor (Kev	vcon)
	PIECP Management Model:		Employer	
	INSTITUTION Name and Address:		orrectional Re , Fort Dodge,	
(1)	Total inmate labor hours worked during	quarter:		- Hours
(2)	Total number of inmates employed duri	ng quarter:		Total Inmates
(3)	Total quarterly gross wages paid: Hourly wage range	N/A	\$	-
	(or) Pieces work rate	N/A		
(4)	Total quarterly contributions to Federal	taxes:	\$	-
(5)	Total quarterly contributions to State tax	es:	\$	
(6)	Total quarterly contributions to Social Se (FICA and Medicare)	ecurity:	\$	_
(7)	Total quarterly contributions to other tax	(es:	\$	
(8)	SUB-TOTAL of taxes paid this quarter (#	[‡] 4- #7):		\$ -
(9)	Total quarterly contributions to victim's	programs:	\$	
(10)	Total quarterly contributions to room an	d board:	\$	-
(11)	Total quarterly contributions to family st	upport:	\$	_
(12)	SUB-TOTAL of PIECP Categorical Dedu	ctions (#9-#11):		\$ -
(13)	Total quarterly contributions to mandato	ory savings:	\$	-
(14)	Since the last quarterly report, have you associate with this cost accounting center. This CAC did not	r? If yes, please e	xplain:	
	Certified correct by: Daniel J. C	lark, Deputy Dir	ector, Iowa P	rison Industries
	v M			11 14 17
Tele	Signature ephone no: (515) 822-8920	Email Address:	C	Date lan.clark@iowa.gov